

TEXAS NATURAL RESOURCE CONSERVATION COMMISSION
Request for Authorization for Disposal of a Special Waste

This form facilitates the request for authorization to dispose of a Special Waste into a Municipal Solid Waste Landfill. Please complete and return to: Technical Assistance Team, Permits Section/MC 124, Municipal Solid Waste Division, P.O. Box 13087 Austin, TX 78711-3087 or fax to (512) 239-6000. For questions, please call the Technical Assistance Team at (512) 239-6781.

A: GENERAL INFORMATION		
Generators Name:		
Generator Mailing Address:		
Generating Site Location:		
Generator Contact:		Phone & Fax No.:
Representative Mailing Address:		Phone & Fax No.:
Description of Waste:		
Description of Process Generating the Waste:		
Requested Volume of Waste (in cubic yards) :		Disposal Frequency:
List attached available chemical analysis results (<i>include sample documentation, quality control data for each analysis, and chain of custody</i>), Material Safety Data Sheets, and/or any process knowledge used to characterized the waste:		
Briefly describe any Recycling, Reuse and/or Waste Minimization efforts:		
Texas Registration No. _____ <small>(only for industrial generators/* must include waste code)</small>		Texas Waste Code No.: _____ <small>(only for industrial Generator/ *must include registration number)</small>
Requested Destination of Waste (Municipal Solid Waste Landfill): Landfill Name: _____ Landfill Permit No.: _____ Landfill Phone No.: _____ / _____ - _____		
B: WASTE/CHEMICAL COMPOSITION: <small>(total must add to 100%) % of Waste</small>		Physical Characteristic of Waste:
<div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="display: flex; justify-content: space-between;"> <div>_____</div> <div>_____</div> </div> <div style="text-align: right;">=100%</div>		<div> <input type="checkbox"/> Solid <input type="checkbox"/> Semi-solid <input type="checkbox"/> Liquid <input type="checkbox"/> Powder </div> <div>Flash Point: _____ °C <input type="checkbox"/> °F</div>
		<div>Free Liquid <input type="checkbox"/> Yes <input type="checkbox"/> No</div> <div>pH: _____ s.u.</div>

GENERATOR/REPRESENTATIVE

I certify that the above information is correct and complete to the best of my knowledge, and the waste is not hazardous as per 40 CFR Part 261. I, _____, am employed by _____, and am authorized to sign this request for:

(NAME, Please Print)

(COMPANY NAME)

(COMPANY NAME)

(SIGNATURE)

(DATE)

TNRCC USE ONLY			
METALS <input type="checkbox"/> Total <input type="checkbox"/> TCLP <div style="display: flex; justify-content: space-between;"> <div> _____ Arsenic (As) _____ Barium (Ba) _____ Cadmium (Cd) _____ Chromium (Cr) </div> <div> _____ Mercury (Hg) _____ Lead (Pb) _____ Silver (Ag) _____ Selenium (Se) </div> <div> _____ Copper (Cu) _____ Nickel (Ni) _____ Zinc (Zn) _____ Thallium (Tl) </div> </div>			<input type="checkbox"/> Approved <input type="checkbox"/> Disapproved <input type="checkbox"/> Other _____ Date _____ See Appendix _____
PETROLEUM PRODUCT CONTAMINATION: Total Petroleum Hydrocarbon (TPH): _____ Total Organic Halogen (TOX): _____ <input type="checkbox"/> Total <input type="checkbox"/> TCLP <div style="display: flex; justify-content: space-between;"> <div> _____ Benzene (B) _____ Ethylbenzene (E) </div> <div> _____ Toluene (T) _____ Xylene (X) </div> </div>		OTHER COMPONENTS: Total (PPM) <div style="display: flex; justify-content: space-between;"> <div> _____ Cyanides _____ Sulfides _____ Others </div> <div> _____ PCBs _____ Phenols </div> </div>	
			Reviewed by: _____ <div style="text-align: right;">(Chemist)</div> Approved by: _____ <div style="text-align: right;">Team Leader Permits Section, MSW</div>